

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10 556 488

FILING DATE

APPLICANT(S)

CLAIMS

AS FILED

AFTER
1ST AMENDMENT

AFTER
2ND AMENDMENT

1

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TOTAL IND.

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TOTAL DEF.

1

1

1

1

TOTAL CLAIMS

20

20

20

AS FILED

AFTER
1ST AMENDMENT

AFTER
2ND AMENDMENT

51

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100

TOTAL IND.

1

1

1

TOTAL DEF.

1

1

1

TOTAL CLAIMS

20

20

20